

## Notice of changes to CURES Program

Atlantic Associates, Inc (AAI) is pleased to announce that the California Prescription Drug Monitoring Program (PDMP) Direct Dispense Application is now available. This application is mainly for Direct Dispensers and Pharmacies that *do not* have a software vendor or have the ability to create an electronic file in the required ASAP format .txt file. The instruction guide can be found at [www.aaicures.com](http://www.aaicures.com).

Effective immediately, MS Excel spreadsheets and paper submissions ***will no longer be accepted***. You will be able to submit this data through the CA PDMP Direct Dispense Application.

Pharmacies and Dispensers, which currently submit files to AAI via the secure FTP using an ftp client, may continue to do so. All submitters will continue to receive file notifications as usual.

***\*\*If you do not currently receive Acceptance/Rejection Notifications via email you must sign up for timely delivery of notifications. \*\****

Effective March 1, 2013, Atlantic Associates, Inc (AAI) will implement new edits to the following ***additional fields*** (shown below) as mandated by the CA Department of Justice and Board of Pharmacy.

AAI *will* notify the pharmacy and/or dispenser software vendors that are on their distribution list, they will have until February 28, 2013 to make modifications to software. After February 28, 2013, all records will be rejected for missing or invalid information.

### **Field Additions to electronic reporting requirements. This list is additions *only*.** **ASAP Version 4, Release 1 - Validations REQUIRED effective as of 02/28/13**

Reference	Data Element Name	Validation Criteria	Required/ Optional/ When Available	Error/ Warning
<b>PAT - Patient Information</b>			<b>Optional</b>	
PAT 01	ID Qualifier of Patient Identifier	When available	Optional	
PAT 02	ID Qualifier	When available	Optional	
PAT 03	ID of Patient	When available	Optional	
PAT 04	ID Qualifier of Additional Patient Identifier	When available	Optional	
PAT 05	Additional Patient ID Qualifier	When available	Optional	
PAT 06	Additional ID	When available	Optional	
PAT 21	Patient Location Code	When Available	Optional	
<b>DSP - Dispensing Record</b>			<b>Required</b>	
DSP 11	Drug Dosage Units Code	Code 01=Each (ea) Code 02=Milliliters (ml) Code 03=Grams (gm) No alpha characters	Required	Error
DSP 12	Transmission Form of Rx Origin Code	Code 01=Written Prescription Code 02=Telephone Prescription Code 03=Telephone Emergency Prescription Code 04=FAX Prescription Code 05=Electronic Prescription Code 99=Other	Required	Error
DSP 13	Partial Fill Indicator	Code 01=Yes Code 02=No	Required	Error
DSP 14	Pharmacist National Provider Identifier (NPI)	When available	Optional	
DSP 15	Pharmacist State License Number	When available	Optional	

DSP 16	Classification Code for Payment Type	Code 01=Private Pay (Cash, Charge, Credit Card) Code 02=Medicaid Code 03=Medicare Code 04=Commercial Insurance Code 05=Military Installations & VA Code 06=Workers' Compensation Code 07=Indian Nations Code 99=Other	Required	Error
DSP 17	Date Sold		Optional	
CDI 05	Compound Drug Dosage Units Code	Code 01=Each (ea) Code 02=Milliliters (ml) Code 03=Grams (gm) Not null if field conditionally required No alpha characters	Conditionally Required - if CDI (Compound) Segment required	If CDI Segment required: Error
<b>AIR - Additional Information Reporting</b>			<b>Optional</b>	
AIR 04	ID Qualifier of Person Dropping Off or Picking Up Rx	When available Not applicable to direct dispense	Optional	
AIR 05	ID of Person Dropping Off or Picking Up Rx	When available Not applicable to direct dispense	Optional	
AIR 06	Relationship of Person Dropping Off or Picking Up Rx		Optional	
AIR 07	Last name of Person Dropping Off or Picking Up Rx	When available	Optional	
AIR 08	First Name of Person Dropping Off or Picking Up Rx	When available Not applicable to direct dispense	Optional	
AIR 09	Last Name or Initials of Pharmacist	When available	Optional	
AIR 10	First Name of Pharmacist	When available	Optional	